



General Assembly

February Session, 2022

Raised Bill No. 368

LCO No. 2873



Referred to Committee on PUBLIC HEALTH

Introduced by:
(PH)

AN ACT CONCERNING SUICIDE PREVENTION.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Section 17a-52 of the general statutes is repealed and the
2 following is substituted in lieu thereof (*Effective July 1, 2022*):

3 (a) There is established a [Youth] Connecticut Suicide Advisory
4 Board, within the Department of Children and Families, which shall be
5 a coordinating source for suicide prevention across a person's lifespan,
6 including, but not limited to, youth suicide prevention. The board [shall
7 consist of twenty members, which shall include] may include (1)
8 representatives from suicide prevention foundations, youth-serving
9 organizations, law enforcement agencies, religious or fraternal
10 organizations, civic or volunteer groups, state and local government
11 agencies, tribal governments or organizations, health care providers or
12 local organizations with expertise in the mental health of children or
13 adults or mental health issues with a focus on suicide prevention, (2)
14 one psychiatrist licensed to practice medicine in this state, (3) one
15 psychologist licensed in this state, (4) one representative of a local or
16 regional board of education, (5) one high school teacher, (6) one high

17 school student, (7) one college or university faculty member, (8) one
 18 college or university student, [and] (9) one parent, and (10) a person
 19 who has experienced suicide ideation or loss, all appointed by the
 20 Commissioner of Children and Families. [.] The board shall include one
 21 representative of the Department of Public Health appointed by the
 22 Commissioner of Public Health, one representative of the state
 23 Department of Education appointed by the Commissioner of Education
 24 and one representative of the Board of Regents for Higher Education
 25 appointed by the president of the Connecticut State Colleges and
 26 Universities. [The balance of the board shall be comprised of persons
 27 with expertise in the mental health of children or mental health issues
 28 with a focus on suicide prevention and shall be appointed by the
 29 Commissioner of Children and Families. Members of the board shall
 30 serve for two-year terms, without compensation. Any member who fails
 31 to attend three consecutive meetings or fifty per cent of all meetings held
 32 during any calendar year shall be deemed to have resigned from the
 33 board. The Commissioner] The Commissioners of Children and
 34 Families and Mental Health and Addiction Services, or the
 35 commissioners' designees, shall [be a nonvoting, ex-officio member]
 36 serve as cochairpersons of the board. The board shall elect a [chairman,
 37 and a vice-chairman to act in the chairman's absence] representative of
 38 a local organization with expertise in mental health or a suicide
 39 prevention foundation, if such a representative is appointed by the
 40 Commissioner of Children and Families, to serve as a cochairperson of
 41 the board. The board may adopt bylaws to govern it and its meetings.

42 (b) The board shall: (1) Increase public awareness of the existence of
 43 [youth] suicide and means of suicide prevention across a person's
 44 lifespan; (2) make recommendations to the [commissioner]
 45 Commissioners of Children and Families and Mental Health and
 46 Addiction Services for the development of state-wide training in the
 47 prevention of [youth] suicide; (3) develop a state-wide strategic [youth]
 48 suicide prevention plan; (4) recommend interagency policies and
 49 procedures for the coordination of services [for youths and families] in
 50 the area of suicide prevention, intervention and response; (5) make

51 recommendations for the establishment and implementation of suicide
 52 prevention, intervention and response procedures in schools and
 53 communities; (6) establish a coordinated system for the utilization of
 54 data for the prevention of [youth] suicide; (7) make recommendations
 55 concerning the integration of suicide prevention and intervention
 56 strategies into [other] youth-focused prevention and intervention
 57 programs; and (8) periodically offer, within available appropriations,
 58 [youth] suicide prevention training and education for health care and
 59 behavioral health care providers, school employees, faculty members of
 60 institutions of higher education and other persons who provide services
 61 to children, [young] adults and families.

62 Sec. 2. Subsection (b) of section 20-10b of the general statutes is
 63 repealed and the following is substituted in lieu thereof (*Effective July 1,*
 64 *2022*):

65 (b) Except as otherwise provided in subsections (d), (e) and (f) of this
 66 section, a licensee applying for license renewal shall earn a minimum of
 67 fifty contact hours of continuing medical education within the
 68 preceding twenty-four-month period. Such continuing medical
 69 education shall (1) be in an area of the physician's practice; (2) reflect the
 70 professional needs of the licensee in order to meet the health care needs
 71 of the public; and (3) during the first renewal period in which continuing
 72 medical education is required and not less than once every six years
 73 thereafter, include at least one contact hour of training or education in
 74 each of the following topics: (A) Infectious diseases, including, but not
 75 limited to, acquired immune deficiency syndrome and human
 76 immunodeficiency virus, (B) risk management, including, but not
 77 limited to, prescribing controlled substances and pain management,
 78 and, for registration periods beginning on or after October 1, 2019, such
 79 risk management continuing medical education may also include
 80 screening for inflammatory breast cancer and gastrointestinal cancers,
 81 including colon, gastric, pancreatic and neuroendocrine cancers and
 82 other rare gastrointestinal tumors, (C) sexual assault, (D) domestic
 83 violence, (E) cultural competency, and (F) behavioral health, provided
 84 further that on and after January 1, 2016, such behavioral health

85 continuing medical education may include, but not be limited to, at least
 86 two contact hours of training or education during the first renewal
 87 period in which continuing education is required and not less than once
 88 every six years thereafter, on (i) suicide prevention, or (ii) diagnosing
 89 and treating [(i)] (I) cognitive conditions, including, but not limited to,
 90 Alzheimer's disease, dementia, delirium, related cognitive impairments
 91 and geriatric depression, or [(ii)] (II) mental health conditions,
 92 including, but not limited to, mental health conditions common to
 93 veterans and family members of veterans. Training for mental health
 94 conditions common to veterans and family members of veterans shall
 95 include best practices for [(I)] determining whether a patient is a veteran
 96 or family member of a veteran, [(II)] screening for conditions such as
 97 post-traumatic stress disorder, risk of suicide, depression and grief, and
 98 [(III)] suicide prevention training. For purposes of this section,
 99 qualifying continuing medical education activities include, but are not
 100 limited to, courses offered or approved by the American Medical
 101 Association, American Osteopathic Association, Connecticut Hospital
 102 Association, Connecticut State Medical Society, Connecticut
 103 Osteopathic Medical Society, county medical societies or equivalent
 104 organizations in another jurisdiction, educational offerings sponsored
 105 by a hospital or other health care institution or courses offered by a
 106 regionally accredited academic institution or a state or local health
 107 department. The commissioner, or the commissioner's designee, may
 108 grant a waiver for not more than ten contact hours of continuing medical
 109 education for a physician who [: (I) Engages] engages in activities
 110 related to the physician's service as a member of the Connecticut
 111 Medical Examining Board, established pursuant to section 20-8a, [: (II)]
 112 engages in activities related to the physician's service as a member of a
 113 medical hearing panel, pursuant to section 20-8a, [: or (III)] or assists the
 114 department with its duties to boards and commissions as described in
 115 section 19a-14.

116 Sec. 3. Subdivision (6) of subsection (b) of section 10-222q of the
 117 general statutes is repealed and the following is substituted in lieu
 118 thereof (*Effective July 1, 2022*):

119 (6) Three appointed by the minority leader of the Senate, one of
 120 whom is a representative of the Connecticut Education Association; one
 121 of whom is a representative of the National Alliance on Mental Illness,
 122 Connecticut; and one of whom is a representative of the [Youth]
 123 Connecticut Suicide Advisory Board established pursuant to section
 124 17a-52, as amended by this act;

This act shall take effect as follows and shall amend the following sections:

Section 1	<i>July 1, 2022</i>	17a-52
Sec. 2	<i>July 1, 2022</i>	20-10b(b)
Sec. 3	<i>July 1, 2022</i>	10-222q(b)(6)

Statement of Purpose:

To expand the scope of the Youth Suicide Advisory Board and require continuing medical education regarding suicide prevention.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]